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**FAX TRANSMISSION****DATE:** September 21, 2005**PTO IDENTIFIER:** Application Number 10/799,514-Conf. #8487  
Patent Number**Inventor:** Francois Spertini et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** MARSHALL, GERSTEIN & BORUN LLP

Jeffrey S. Sharp

**PHONE:** (312) 474-6300**Attorney Dkt. #:** 30985/41486**PAGES (Including Cover Sheet):** 10**CONTENTS:** Amendment (7 pages)  
Amendment Transmittal (1 page)  
Certificate of Transmission (1 page)

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PTO/SB/07 (08-04)

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Application No. (if known): 10/799,514

Attorney Docket No.: 30985/41486

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Amendment (7 pages)

Amendment Transmittal (1 page)


SEP 21 2005

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 30985/41486		
Application No. 10/799,514-Conf. #8487	Filing Date March 12, 2004	Examiner Not Yet Assigned	Art Unit 1644		
Applicant(s): Francois Spertini et al.					
Invention: ALLERGEN PEPTIDE FRAGMENTS AND USE THEREOF					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	16	- 54 =		x	
Independent Claims	3	- 13 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>0.00</b>
<input type="checkbox"/> Large Entity <span style="float: right;"><input checked="" type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>13-2855</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Jeffrey S. Sharp Attorney Reg. No.: 31,879  MARSHALL, GERSTEIN & BORUN LLP 233 S. Wacker Drive, Suite 6300 Sears Tower Chicago, Illinois 60606-6357 (312) 474-6300				Dated: <u>September 21, 2005</u>	
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. Dated: <u>September 21, 2005</u>					
Signature: <u>Jeffrey S. Sharp</u>				(Jeffrey S. Sharp)	

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Dated: September 21, 2005 Signature: 

(Jeffrey S. Sharp)

Docket No.: 30985/41486  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:

**Francois SPERTINI et al.**

Application No.: 10/799,514

Confirmation No.: 8487

Filed: March 12, 2004

Art Unit: 1644

For: ALLERGEN PEPTIDE FRAGMENTS  
AND USE THEREOF

Examiner: Not Yet Assigned

**FIRST PRELIMINARY AMENDMENT**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on Page 2 of this paper.

**Remarks/Arguments** begin on Page 7 of this paper.